

PROJECT: _____ TIP NO.: _____ DATE: _____

BRIDGE STATION: _____

PIER LOCATION: BENT NO.: _____ PIER NO.: _____

EXCAVATION DATE: START: _____ FINISH: _____

N. C. DEPT. OF TRANSPORTATION DRILLED PIER DRILLING LOG
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TOP (REFERENCE) ELEVATION: _____

COMPLETE THIS FORM FOR EACH DRILLED PIER. ATTACH TO THE CORRESPONDING DRILLED PIER INSPECTION FORM AND FORWARD COPIES OF ALL FORMS TO EITHER MR. K. J. KIM, EASTERN REGIONAL GEOTECHNICAL MANAGER (DIVISIONS 1 THROUGH 7), OR MR. JOHN PILIPCHUK, WESTERN REGIONAL GEOTECHNICAL MANAGER (DIVISIONS 8 THROUGH 14).

BEGIN DEPTH	END DEPTH	MATERIAL DESCRIPTION	DRILLING TOOLS	BEGIN TIME	ENDING TIME

GEOTECHNICAL OPERATIONS ENGINEER _____

RESIDENT ENGINEER: _____

INSPECTOR: _____

DRILLING CONTRACTOR: _____

GENERAL CONTRACTOR: _____